Commonwealth of Massachusetts Executive Office of Health and Human Services



Health Information Technology Council July Meeting

July 1, 2013

3:30-5:00 P.M.

One Ashburton Place, 21st Floor, Boston



Agenda



Today's Agenda:

- 1. Meeting Minutes approval [5 min]
- 2. Mass HIway Implementation Updates
 - a) Massachusetts eHealth Collaborative [20 min] Micky Tripathi
 - b) Meditech [20 min] John Valutkevich
- 3. Advisory Group Discussion & Updates [25 min] Micky Tripathi
- 4. Mass HIway Update
 - a) Outreach & Sales Update [5 min] Sean Kennedy
 - b) Implementation & Support Update [5 min] Manu Tandon
 - c) Phase 2 Update [5 min] Manu Tandon
- 5. Wrap up and next steps [5 min] Manu Tandon





Discussion Item 1:

Mass HIway Implementation Updates –

Massachusetts eHealth Collaborative

Meditech,

Commonwealth of Massachusetts

Executive Office of Health and Human Services



Launching the MAeHC Quality Data Center on the MA HIway

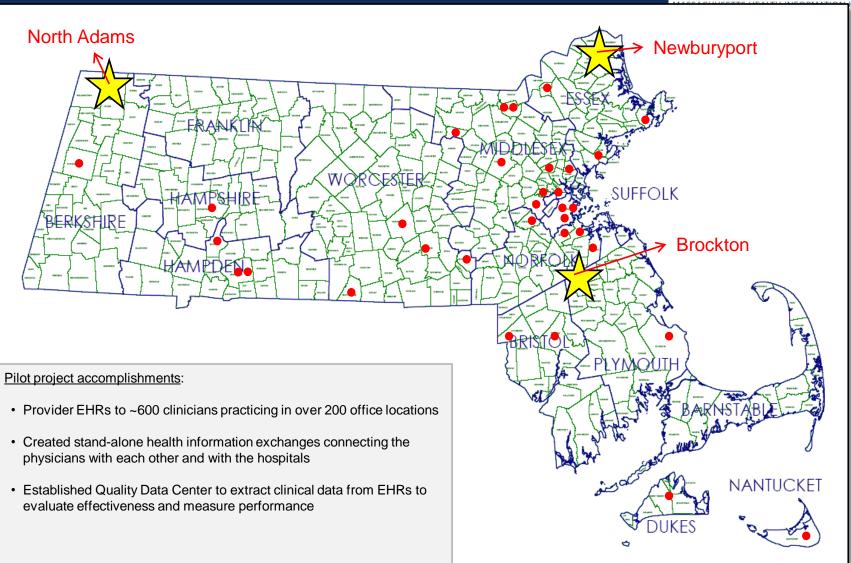
July 1, 2013





MAeHC Pilot Program: 2005-2008

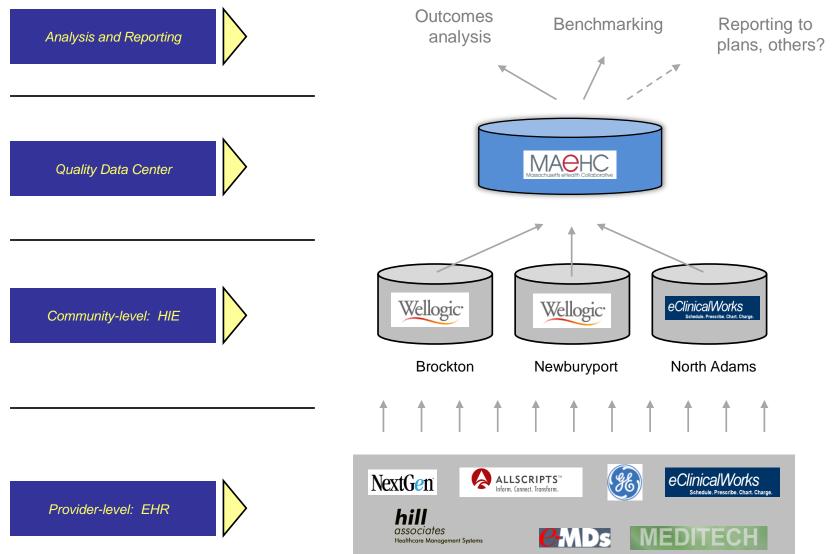






MAeHC Pilot Project Architecture and Data Flows

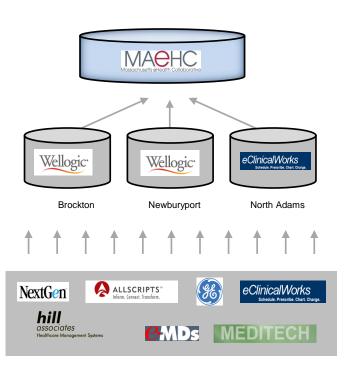






Life on the Bleeding Edge: 2006-2008



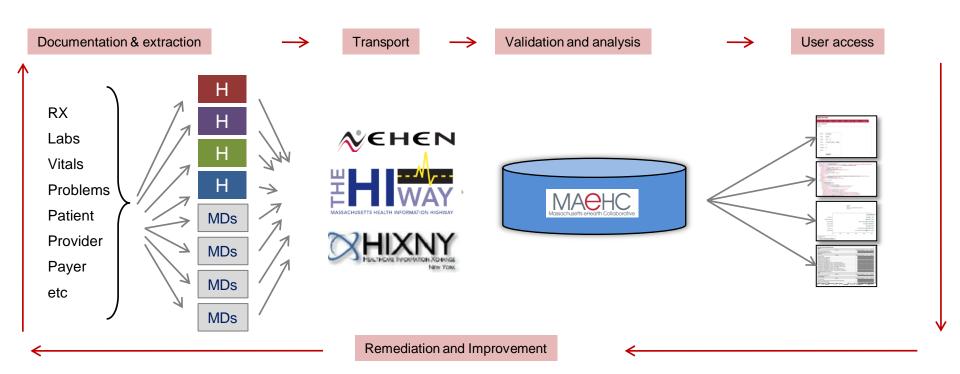


- All standards developed by MAeHC
 - National EHR certification did not exist
 - No nationally approved standards for content, transport, or measurement
 - EHR usage requirements designed from scratch to support robust quality measurement
- Designed to leverage community HIEs
 - Consent-based information flow
 - Patient-matching within HIEs
 - Pseudonymization of patient identity
 - Re-identification managed at HIEs



Performance Measurement Process Steps

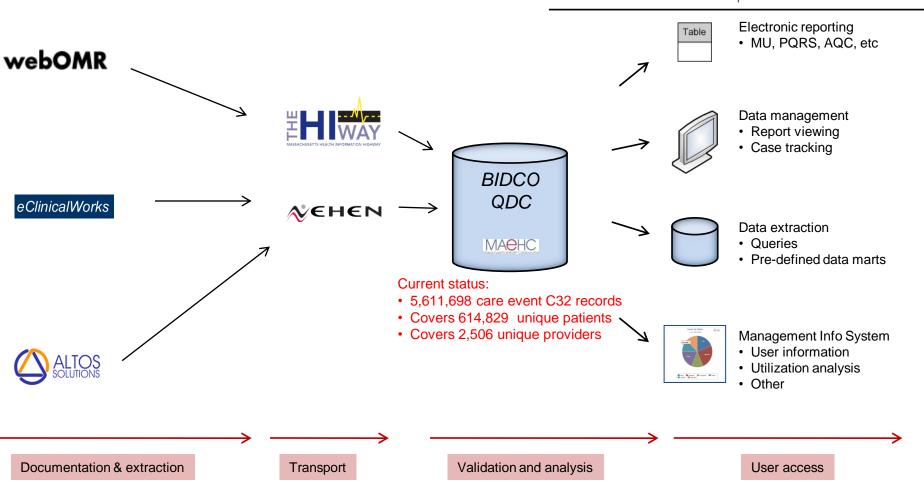






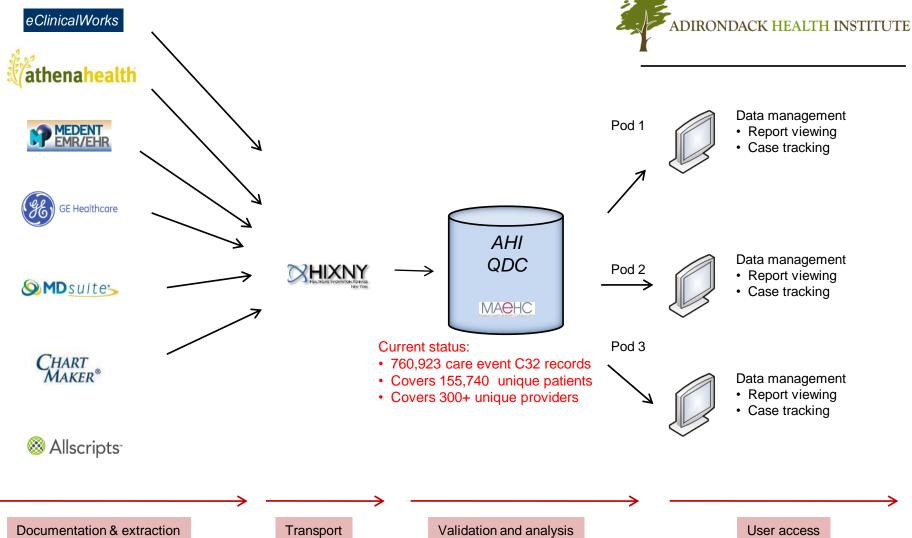


Beth Israel Deaconess | CARE ORGANIZATION LLC





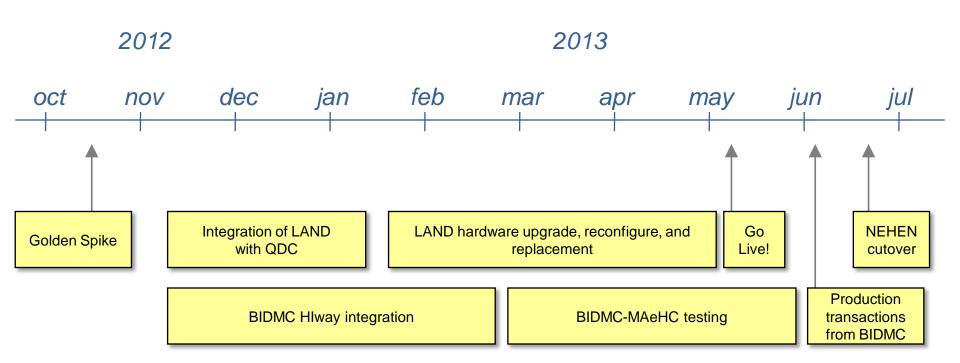






HIway Implementation Process







Our overall experience



Lots of growing pains

- Hardware
- Integration with QDC

What we had to do

- Be patient and flexible
- Tolerate ambiguity
- Recognize that everyone was working as hard as they could

Current status

- HIway seems to be working perfectly messages being processed faster than NEHEN
 - Have received 80K+ records from BIDMC since go-live (3K+ per day)

Future plans

- Migrate remainder of BIDCO practices from NEHEN
- Bring additional customers onto HIway as soon as possible







MEDITECH's Update

AGENDA



- MEDITECH's Vital Signs and Massachusetts Presence
- MEDITECH's Direct Solution Ready for the HIWay!
- Direct Messaging Center Workflows
- MEDITECH Pilot Clients
- Recommendations for the HIT Committee

We Have a Strong Local Presence in Massachusetts

- Massachusetts Market Share
 - Acute Care, Critical Access, Children Hospitals: 66%
 - Long Term Care: 75%
 - Rehab: 18%
 - Psych: 50%
- 87 Massachusetts Hospitals
 - 6.x 11 hospitals
 - Client/Server 34 hospitals
 - MAGIC 42 hospitals







MEDITECH Direct Solutions and Workflows

John Valutkevich Manager EHR Initiatives



Transitions of Care



Meaningful Use Requires:

Stage 1

The EP, eligible hospital, or CAH that transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 50 % of transitions of care and referrals.

• Stage 2

Provide summary of care document for more than 50% of transitions of care and referrals with 10% sent electronically and at least one sent to a recipient with a different EHR vendor or successfully testing with CMS test EHR





Utilizing Direct in MEDITECH Platforms



- Direct is part of MEDITECH Product Releases:
 - MAGIC 5.66
 - Client/Server 5.66
 - 。 6.07
 - 。 6.13
- MEDITECH customers either have or are being delivered this release
- Direct is either an add-on component to the existing CCD
 Interface Suite or is licensed as a new CCD Interface Suite
- The payload is a CCDA





- MEDITECH can be configured to connect to any HISP
 - Remain HISP Agnostic
 - HISP Services
 - Manage Certificates
 - Manage Addresses
 - How Many Addresses ?
 - Recommend Organizational to Start
 - Add physicians as needed
 - Physician Address Book Adoption
- Current Certification for SMIME/SMTP
- Pending Certification for optional XDR/SOAP transactions





- Stand Alone Routine for Medical Records and Clinicians
 - Bi-Directionally send and receive CCDAs
- Incorporated into Discharge Routines
- Available for patients via MEDITECH Portal

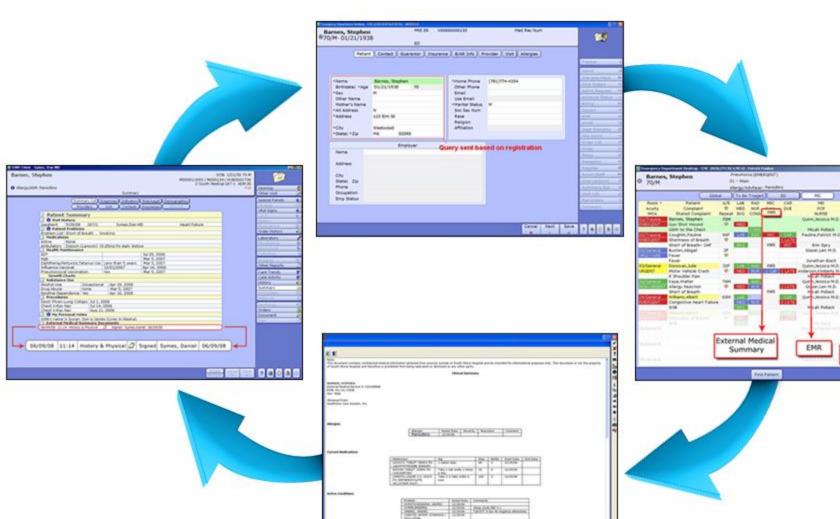




Transitions of Care: Consider the Workflow



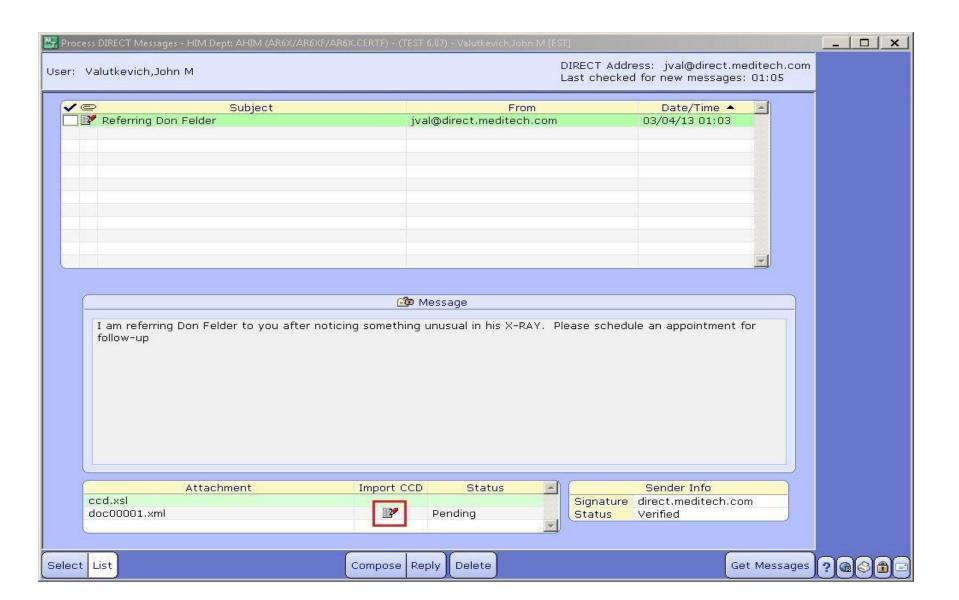
Summary





Direct Enabled Message Center

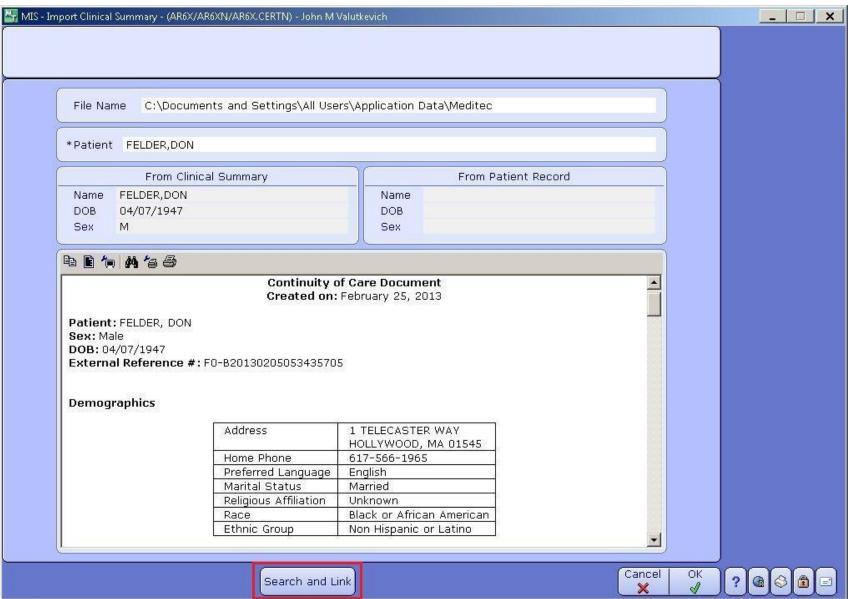






Direct Enabled Message Center







Send CCDA Outbound via Discharge

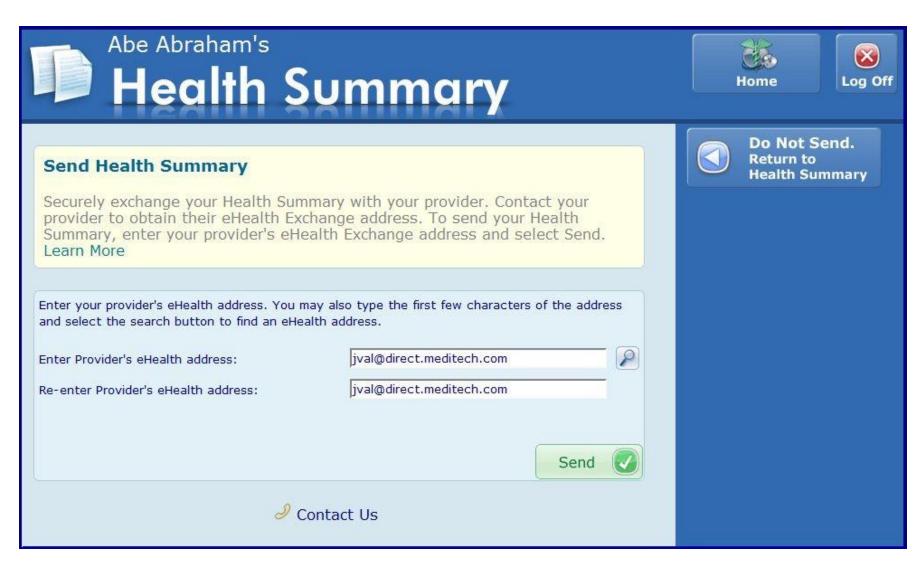


		MASSACHUSE	ETTS HEALTH INFO	-
🛂 SHARPE,MARY DZ00000390 - P	CS Open Chart - HIM Dept: AHIM (AR6X/AR6XF/AR6X.CERTF) - (TEST 6.07) - Valutkevich, John M [EST]			×
Sharpe,Mary	DA0000000585 Allergy/Adv: penicillin G, Codeine	DZ00000390 F00000391	•	j.
	(Discharge Plans)(Discharge Data)(Care Team)			
			Status Board	1 🗮
Туре	O Document	② Detail	Select Visits	
Instructions	Angina		Summary	Œ
		▼ seed	Review Visit	æ
Stand Alone Forms			Notices	T.C.
Prescriptions			New Results	
Visit Report		w)	Clinical Pane	
- Forms - Referrals	Valutkevich, John M (Staff Physician)	<u> </u>	Vital Signs	-V-
Referrals	Valutkevich, John W. (Staff Physician)	(U.)	I & O	à
- Care Plan Goals	CARE PLAN		Medications	
	PLEASE FOLLOW ALL INSTRUCTIONS PER YOUR PHYSICIAN		Laboratory	8
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 Activity Restrictions/ Additional Instructions 			Blood Bank	(0)
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Addl Reference Text			Patient Care	_
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			Clinical Data	
			Plan Of Care	
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			TAR	
			Discharge	~
	Print Print By Reports	Cancel Save	? @ ♦ @	



Send CCDA Outbound via Portal







Mass HIway MEDITECH Pilot Sites



Customer Site	Platform		
Berkshire Hospital	Client Server		
Beth Israel Deaconess (Milton, Needham)	MAGIC		
Harrington Hospital	Client Server		
Holyoke Hospital	MAGIC		
Jordan Hospital	6.0		
Winchester Hospital	MAGIC		



MEDITECH Recommendations



- Organizational Direct Addresses for Acute Facilities
- Certificate Management Education for customers
- Use Case Education
- Readiness Assessments of an Organization's surrounding EMR systems and Trading Partners



- MEDITECH Customers are SMTP/SMIME compliant messaging ready
- Adoption of Provider Directory Specification
- Use Cases
 - Discharge
 - ED Admission
- We need MeHI's help with education





Discussion Item 2:
Advisory Group Discussion & Updates

Commonwealth of Massachusetts

Executive Office of Health and Human Services

Phase 2 Preliminary Design









Phase 1

Send and receive

- Create infrastructure to enable secure transmission ("directed exchange") of clinical information
- Will support exchange among clinicians, public health, and stand-alone registries
- · Focus on breadth over depth
- Example: Patient has been discharged from hospital and wants hospital to send discharge summary to PCP

Phase 2

Search and retrieve

- Create infrastructure for cross-institutional queries for and retrieval of patient records
- Add additional public health services
- Example: Patient has been admitted to hospital and wants hospitalist to have patient record from PCP



Phase 1 Functions: User-to-User Push

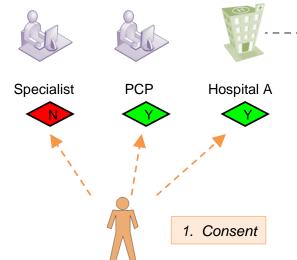




Provider Directory

<u>Provider name</u>	Local name Certificate	Institution	<u>Direct address</u>
Smith, Marilyn M	Smith, Marilyn 58&HTU	Hospital B	Marilyn.Smith@HospB.masshighway.net
Smith, Marilyn M	Smith, Mary 93T\$@N	Highland Primary Care	Marilyn.Smith@HPC.masshighway.net

2. Lookup Provider Address



Jennifer L Jones

3. Send Record

Hospital B



Framework for Query for a Patient Record Current Direction of Federal Certification Approach for MU Stage 3



Data Requestor

Discover provider address and security credentials



Send:

- Authenticating credentials
- · Patient-identifying information
- Authorization for request
- Type of information being requested (optional)

query

response

Restful web services

Receive:

- Medical record information or acknowledgment of non-fulfillment of request
- · Log transaction

Data holder

Receive:

- · Validate authentication credentials
- Match patient
- · Verify authorization for request
- Check for requested information



Send:

- Medical record information or acknowledgment of non-fulfillment of request
- Log transaction



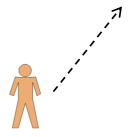
MA HIway Phase 2 Consent Approach Patient consent on both sides of transaction





Record Locator Service

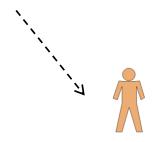
Patient name events	<u>Local name</u>	<u>Institution</u>	MRN	<u>Last event</u>	<u>#</u>
Jones, Jennifer L	Jones, Jennifer	Hospital A	1234	Dec 3, 2012	3
Jones, Jennifer L	Jones, Jenny	PCP	5678	Jul 8, 2010	12



Patient - Jennifer L Jones

Consent to Publish Provider Relationships

- Patient gives consent to a data holder to publish patient/entity relationship to the Mass HIway Record Locator Service (RLS)
- Patient consent preference captured by data holder and conveyed to RLS in an Admit, Discharge, Transfer (ADT) message (or other HIway-permitted format such as PIX/PDQ)
- Data holder retains consent documentation and transaction/disclosures log for audit



Patient - Jennifer L Jones

Consent to Search or Retrieve

- Patient gives consent to a data requestor to view RLS and retrieve records from a data holder – consent is conveyed in a query message
- Requesting organization retains consent documentation and transaction/disclosures log for audit



Data holder publishes patient/entity relationship to RLS



⊭HI₩AY

Record Locator Service

Patient name	Local name	Institution	<u>MRN</u>	Last event date	# events
Jones, Jennifer L	Jones, Jennifer	Hospital A	1234	Dec 3, 2012	3
Jones, Jennifer L	Jones, Jenny	PCP	5678	Jul 8, 2010	12





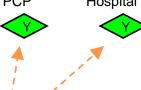




Specialist



Hospital A



1. Consent to Publish Provider Relationships

Jennifer L Jones

- Assume EHRs capable of capturing very limited consent information
- Patient consent flag conveyed in RLS update messages (ADT)
- Consent flag acts like memory-less toggle allowing relationship to be published in RLS
- · If "yes", relationship published in RLS
- If "no", message rejected (ie, relationship not published in RLS)
- If changing:
 - "Yes-to-No": If relationship was previously published, previous messages stored but hidden – only available for audit
 - "No-to-Yes": Relationship published in RLS from that point forward



Data requestor requests patient record – Data holder responds

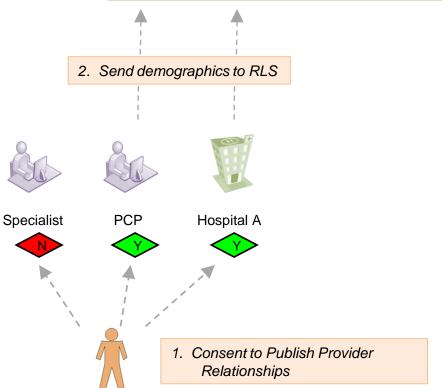




Jennifer L Jones

Record Locator Service

Patient name	Local name	<u>Institution</u>	MRN	Last event date	# events
Jones, Jennifer L	Jones, Jennifer	Hospital A	1234	Dec 3, 2012	3
Jones, Jennifer L	Jones, Jenny	PCP	5678	Jul 8, 2010	12



4. View Patient Relationships (constrained to patients with established relationships)





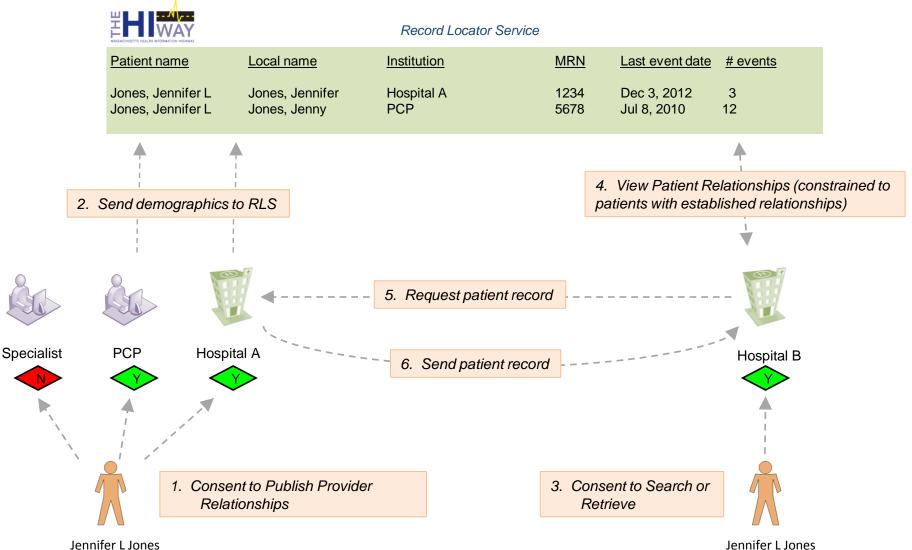
3. Consent to Search or Retrieve

Jennifer L Jones



Data requestor requests patient record – Data holder responds



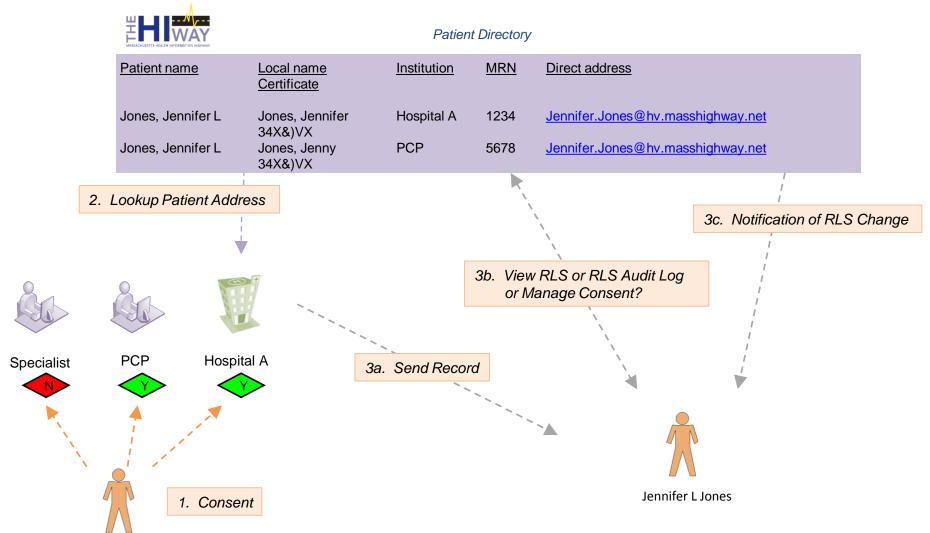




Jennifer L Jones

Possible patient options







Next steps



Pressure-test design

- Advisory Group feedback
- Customer discovery sessions
- More challenging scenarios (sensitive conditions, minors, etc)

Finalize design

- Define final requirements
- Break out into phased releases





Discussion Item 3:

Mass HIway Update – Outreach & Sales Update, Implementation & Support Update, Phase 2 Update



Last Mile Updates

HIway Interface Grants

Outreach

- In review now notification of award early July
- Good mix of applicants small and large; specialty and general
- Will provide review summary at the next Council meeting
- HIway Implementation Grants
 - Held kick-off call 70+ attended
 - Conducting 'grantee-specific' kick-offs now
 - Grantees and their collaborators are signing PAs
 - e.g. UMass Memorial Medical Center, Milford Regional Hospital,
 CVS Caremark, Overlook VNA

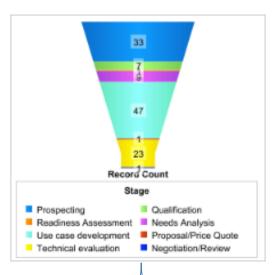




as of 6/28/2013

Opportunities (by stage)

Outreach

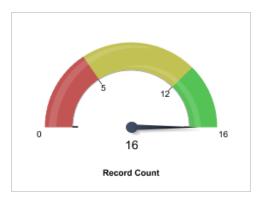


Opportunities	80+
Organizations	440+
Hlway Revenue	\$875,000+

Grants Awarded

Grant	#
HIway Interface Grants, v1	2
HIway Implementation Grants	32
HIway Interface Grants, v2	12-16 anticipated

PAs Signed to Q2 Target*



PA = Participation Agreement *Signed PAs does not equate to Implementation

Orgs 30-days to Hand-off to Ops

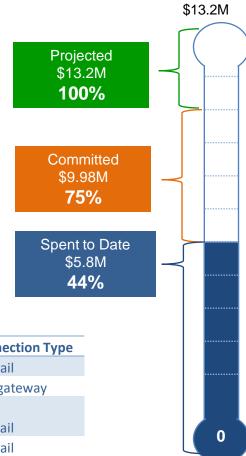
Radius Healthcare Center at Worcester

Organization Name Connection Type
Fairlawn Rehabilitation Center Webmail
Family Health Center of Worcester LAND gateway
Holy Trinity Nursing and Rehabilitation
Center Webmail
Life Care Center of Auburn Webmail
North Adams Regional Hospital
Overlook VNA LAND gateway

Webmail

HIE Grant Spend Down Tracker

as of 5/31/2013





Sales

Implementation

Support



Organization	Use Case	Status/Target Date
Implementation		
Boston Public Health, Atrius, Children's, Partners	Care coordination, public health reporting	Various levels of testing
Metrowest, St. Vincent, Pediatric Care Associates, Notre Dame Long Term Care, UMASS, CVS Minute Clinics	Care coordination with Long Term Care facilities	• Provisioning, with some level of testing
Harvard Pilgrim Health	Discharge summaries; data analytics	Completed extensive security testingWorking to exchange
Pilot Project:		
MEDITECH DIRECT Pilot	Pilot project with Jordan Hospital, Harrington Hospital, Berkshire Health, Holyoke Winchester and with Exeter Hospital (NH)	 Held kick-off session on June 24 Working with each site for planning





Organization	Use Case	Status/Target Date
Near Horizon:		
Baystate	PVIX implementation	• Kick-off – 7/2/13
Opiod Treatment Providers (DPH)	Intake, Enrollment, Assessment and Treatment	• Provider kick-off – 6/25/13
DPH – Immunization, ELR, Syndromic and CBHI	More active outreach to current users of DPH programs to move traffic to HIway	 Ongoing – with more concerted focus beginning in 3rd quarter
Last Mile Program Innovation Implementation Grants	Extensive set of use cases among community providers, local HIEs, facilities and service entities	 Active ongoing efforts; project plans being finalized



Outreach

Sales

Implementation

Support



Organization	Use Case	Status/Target Date
Live		
Holyoke Medical Center/Holyoke HIE	First implementation of Direct connect among Holyoke Medical Center and its HIE, HealthConnect	 Successful test with S/MIME and XDR In process of loading providers Working toward test exchange with Network Health in July
Tufts Medical Center	Discharge summaries, data reporting	 Have completed testing with Network Health Testing with Boston Public Health
Beaumont Medical	Part of the IMPACT grant with 16 other organizations including Reliant, Metrowest and several LTC facilities	 In process of provisioning services for the other participants Move to test with intent to move to production
Dr. Gregory Harris	Coordination of behavioral care with multiple facilities	





Organization	Use Case	Status/Target Date
In Production		
BIDMC	Several use cases – registries, data analytics and information exchanged between provider organizations.	 Partners: MAeHC; Network Health and DPH – Immunization Testing: Boston Public Health; Atrius; Partners and DPH – Lab Reporting
Network Health	Receive Discharge Summaries from Tufts Medical Center and BIDMC	 Partners: BIDMC Testing: Working with Tufts Medical, Holyoke HIE, and Brockton Neighborhood Health Center
MAeHC	Analytic services, reporting with BIDMC	Partners: BIDMC79,119 transactions (as of 6/26/13)

Outreach





- Transactions exchanged for June 2013 106,331. Cumulative transactions to date – 1,255,903
- Continued dialog and effort to determine the most effective, scalable means to establish "HISP" connections with vendors in a manner that maintains trust fabric.
 - Major issues to solve authentication and authorization;
 - Direct Trust offers long-term promise;
 - Will need to cut some new ground as thinking and standard evolve



Phase 2 overall timeline



Mass HIway Phase 2 high level project schedule

Activity	Target date
Submit IAPD to CMS	Completed
CMS approval of Phase 2 IAPD	Completed
Phase 2 contract (or change order) executed	June 2013 Completed
Go-live - Public Health - Immunization Registry Node	Completed
Go-live - Public Health - Reportable Lab Results (ELR) Node	Completed
Testing - Public Health - Syndromic Surveillance Node	Completed
Testing - EOHHS – Children's Behavioral Health (CBHI) Node	June 14, 2013 Completed
Go-live for Phase 2, Release 1 (Other Public Health interfaces)	May – Oct 2013
Phase 2 Requirements Gathering & Validation	July 26, 2013
Phase 2 Design Approach Decision	August 2, 2013
Go-live for Phase 2, Release 2 (EMPI, RLS, Consent, Provider Portal, Consumer Portal)	Oct 2013 – Mar 2014





Discussion Item 4:
Wrap up and next steps



HIT Council meeting schedule



HIT Council 2013 Meeting Schedule*:

- January 14 11th Floor Matta Conference Room
- February 4 11th Floor Matta Conference Room
- March 13 11th Floor Matta Conference Room
- April 8 21st Floor Conference Room
- May 6 21st Floor Conference Room
- June 3 21st Floor Conference Room
- July 1 21st Floor Conference Room
- August 5
- September 9
- October 7
- November 11
- December 9

^{*}All meetings to be held from 3:30-5:00 pm at One Ashburton Place, 21st Floor, Boston, unless otherwise noted



Wrap up



Next HIT Council Meeting: August 5, 2013 **Preliminary Agenda:**

- Customer Implementation Updates
- Advisory Group Update/Discussion
 - Discussion Topics?
- Mass HIway Update